COUNTY OF KANE

John A. Cunningham

KANE COUNTY CLERK 719 S. Batavia Ave., Bldg. B Geneva, IL 60134



Election Department Phone: (630) 232-5990 Fax: (630) 232-5870 www.kanecountyelections.org

Receipt for Nominating Petition

March 20, 2018 - 2018 General Primary.

Receipt For:	Jacob D. Serafini 3417 Green Pastures Rd Carpentersville, IL 60110
Filed: Novemb	per 27, 2017 at 8:30:00 AM.
Office: FOR P	RECINCT COMMITTEEMAN, Dundee 18 Party: Democratic
The following	have been received:
✓	Statement of Candidacy
	Loyalty Oath
√	Petition Pages 1-2
	Receipt for Economic Interest Statement (EIS)
Received fro	m:
E	By: Deputy Clerk
	John A. Cunningham - Kane County Clerk
	Name and Title of Local Clerk/Secretary
Printed: 11/27/2017	8:43:51AM
	Receipt for Notice of Obligation D-5

I hereby acknowledge receipt of the Notice of Obligation which outlines obligations and responsibilities under the Illinois Campaign Discolsure Act.

Signature of Candidate or Agent

Suggested Revised August, 2017 SBE No. P-1

STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY
JACOB D SERAFINI	3417 GREEN PASTURES RD CARPENTERSVILLE, IL 60110	precinct committeeman	Dundee 18 TH TownsHyp frainct	Democratic

(for unexpired terms, specify "2 year unexpired term" or "4 year unexpired term" along with the office in the "OFFICE" space provided above) If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10-5.1, complete the following (this information will appear on the ballot) FORMERLY KNOWN AS UNTIL NAME CHANGED ON (List date of each name change) STATE OF ILLINOIS SS. County of Kane **L** JACOB D SERAFINI (Name of Candidate) being first duly sworn (or affirmed), say that I 3417 GREEN PASTURES RD reside the City. Village, Unincorporated EAST DUNDEE (if unincorporated, list municipality that provides postal service) Zip Code 60110 the County of KANE Party; that I am a candidate for Nomination/Election to the office of

PRECINCT COMMITTEEMAN in the 18th District to be seen at a qualified Primary

Party; that I am a candidate for Nomination/Election to the office of District to be seen at a qualified Primary _, State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of the DEMOCRATIC on March 20, 2018 _ (date of election) and that I am legally qualified (including being the holder of any license that may be an eligibility requirement for the office to which I seek the nomination) to hold such office and that I have filed (or I will file before the close of the petition filing period) a Statement of Economic Interests as required by the Illinois Governmental Ethics Act and I hereby request that my name be printed upon the official DEMOCRATIC (Name of Party) Prima b Nomination/Election for such office. (Signature of Signed and aw before me, on Official Seal (SEAL) Gina Beatty Notary Public State of Illinois My Commission Expires 04/28/2020

PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of an DEMOCRATIC Party in	d affiliated with the DEMOC DUNDEE		qualified primary	
	DUNDEE [8]	(township name and pro-	<u>-</u>	-
3417 GREEN PASTURES RD	in the City Village Unincom	porated Area of CARPENTERSVI		ncorporated, list
municipality that provides postal service) Z DEMOCRATIC Party for election	ip Code 60110, County of to the office of PRECINCT C	KANE and State COMMITTEEMAN , for DUNDEE	of Illinois, shall be a	="
name and precinct number), to be voted for	or at the primary election to be h	neld on MARCH 20 2018 (da	ate of election).	
If required pursuant to 10 ILCS 5/7-10.2, comple	ete the following (this information will	l appear on the ballot)		
FORMERLY KNOWN AS(List	UNT all names during last 3 years)	FIL NAME CHANGED ON(List date of	each name change)	
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1. Carin O'Rourke	Carrie O'Rourke	3415 Green Pastures	c'VILe "	Kanı
2. Mille O'Rourle		3415Green Pastures		Kane
Del Mary		343e) Green Partice Pl	CVille ,IL	KANE
the de ann	Jost VARCA	3414 GREEN PASTUKES	C. Ville	Kame
Jayre -	Laura Pierson	3404 green Pastures	cville "	Kane
6.	SALUN STEPP	3914 Farmsteal Cm	CVIII ,IL	Kent
UM	José Aller	3852 Paroue L	a,/1C IL	Typ
8. Cam Schy)	ANNO SCHIMMER	0	CV140 ,IL	KANE
9. Jama M	JAIME TRAVEZ	3804 PARSON NO	11	KANE
10. M. Olu	10 1.7/	3522 High Ridged	1c'Vile"	Kare
State of ILLINOIS	.)			
County of KANE) SS.			
JACUR SOMEINI	(Circulator's Name) do hereby	certify that I reside at 3417	CREEN PAST	was in the
City/Village/Unincorporated Area of CAN	JEMERS VINE (if unincor	porated, list municipality that provide	s postal service)(Zip	Code) (2/16)
County of KANE State of IL	LINOIS that I am 18 years of	age or older (or 17 years of age and	d qualified to vote in I	llinois), that I am
a citizen of the United States, and that the	signatures on this sheet were	signed in my presence, not more that	an 90 days preceding	the last day for
filing of the petitions and are genuine and		A		
qualified voters of the DEMOCRATIC		livision in which the candidates is se	eking nothination/ele	ective office, and
that their respective residences are correct	lly stated, as above set forth.	. 11/	1/~	
		(Circulator	Signature)	
Signed and sworn to (or affirmed) by	AZOB SCRAFINI	before me, on	130 117	
***************************************	(Name of Circulator)		month, day, year)	
(SEAL) Official Seatt	v {	_ Yunal	willy	
Notary Public State My Commission Expire	of Illinois 💃	(Notary Pu	iblic's Signature)	

PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of and	affiliated with the DEMOC	CRATIC Party and	qualified primary electors of the						
DEMOCRATIC Party, in	DUNDEE	(township name and pre	ecinct number) in the County of						
KANE,State of Illinois	do hereby petition that	JACOB D SERAFINI	who resides at						
3417 GREEN PASTURES RD	_ in the City, Village, Unincorp	porated Area of CARPENTERSVII	LE (if unincorporated, list						
municipality that provides postal service) Zi	Code 60110, County of	KANE and State	of Illinois, shall be a candidate of the						
DEMOCRATIC Party for election to the office of PRECINCT COMMITTEEMAN, for DUNDEE (township									
name and precinct number), to be voted for at the primary election to be held on MARCH 20 2018 (date of election).									
If required pursuant to 10 ILCS 5/7-10.2, complete the following (this information will appear on the ballot)									
EODMEDI Y KNOWN AS	UNT	II NAME CHANGED ON							
(List	all names during last 3 years)	(List date of	each name change)						
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR COUNTY						
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE						
1. duse'	Lucy . Nyon	3516 Hogh Heuce	CVILLE KANE.						
2. Barbara Hammand	BOHIMMON	3510 HighHill Cive	C'ville " Kare						
3. T	RON HAMMON	3510 HiGH Hill de	2 C. vile Kang						
4. Marthu & Maria	Martha E. Garcia	3518 HighHill Circle	Carpenterille Kane						
5. Proper le ali	Tracy Sevafini		C-Ville" Kane						
8 0 0		3533 High Ridge	Chille " Kanl						
7.		1 A	Cur'll Lame						
8. Sproka William	Sandralvi Hman	3847 Parsons	,IL						
9.			,IL						
10.			,īL						
		9 10 11 12	<u> </u>						
State of ILLINOIS									
	SS.	E							
County of KANE	, (2)	10/2.12	Care (Paracott						
1.) ARUS SKAFUN	(Circulator's Name) do hereby	certify that I reside at 3417	in the						
City/Village/Unincorporated Area of	たびでないに (If倒hincor	porated, list municipality that provide	s postal service)(Zip Code)(2/1/ C						
County of KANE, State of II	LINUIS that I am 18 years of	age or older for the years of age and	d qualified to vote in Illinois), that I am						
a citizen of the United States, and that the	signatures on this sheet were	eigned of the persons so signing to	were at the time of signing the petition						
filing of the petitions and are genuine and that to the best of my knowledge and belief the persons so signing were at the time of signing with patterns.									
/ / // //									
that their respective residences are correctly stated, as above set forth.									
(Circulator Signature)									
Signed and sworn to (or affirmed) by ACOS SWAIN before me, on (Insert month, day, year)									
Official Seal									
(SEAL) Gina Beatt Notary Public State	y (ublie's Signature)						
My Commission Expire	s 04/28/2020 \$	2 0 (1.000)							
5~~~~~~~	SHEET NO								